

First Steps Services

What are the services?

- First Steps helps low-income pregnant women get the health and social services they need. Services are delivered by a network of both public and private agencies across Washington State. The program is managed collaboratively by the Washington State Department of Social and Health Services (DSHS) and the Washington State Department of Health (DOH). DSHS provides Medicaid funding for all First Steps services. DSHS and DOH jointly share administration of the program through an inter-agency agreement and delegation of authority.
- Goals of the First Steps Program
 - provide interventions as early in pregnancy as possible
 - promote early and continuous prenatal care
 - reduce incidence of low birth weight infants
 - decrease health disparities among vulnerable populations
 - reduce the number of unintended pregnancies
 - reduce the number of repeat pregnancies within two years of delivery
 - increase the initiation and duration of breastfeeding
 - reduce tobacco use during pregnancy and pediatric exposure to second-hand smoke
 - reduce the incidence of SIDS
 - reduce infant mortality rates
 - increase self-sufficiency of the mother and family unit
- In 2003, First Steps provided prenatal care and/or delivery services to 36,118 women. Of these women, approximately 71% received maternity support services.¹
- There are three components of First Step support services:
 - Maternity Support Services: These are preventive health services designed to supplement medical visits and include screening, assessment, interventions, education, case management, and counseling. Services are provided in an office or the client's home by a multidisciplinary team of nurses, dietitians, behavioral health specialists and community health workers. The number and type of visits provided depends on the needs of the woman and her family but the total of all visits cannot exceed 15 hours. Interventions are based on identified risk factors and focus on improving pregnancy, early parenting outcomes, and self sufficiency.
 - Infant Case Management: The goal of Infant Case Management is to improve the birth parents' (and family's) self sufficiency in accessing existing social and health resources in the community to meet their immediate needs. These services are limited to 1) acting on the client's behalf in order to ensure the client receives needed services (advocacy); 2) networking and/or collaborating among staff of different agencies/programs to connect clients to services and avoid duplication (linkages); and 3) providing information to clients to assist them in receiving medical, social, educational, or other services (referral).

¹ Cawthon, L. Maternity Support Services and Maternity Infant Case Management Use by Women with Medicaid-paid Births in 2003, Washington State Department of Social and Health Services First Steps Database, 4/18/05.

- Additional Support Services include childbirth education, childcare, breastfeeding consultation, tobacco cessation counseling, family planning (post delivery), and access to a public education and referral toll-free line through the Healthy Mothers, Healthy Babies Coalition. (For additional information, see the *Healthy Mothers, Healthy Babies Services* Chapter.)
- First Steps Website: <http://fortress.wa.gov/dshs/maa/firststeps>

How/where is the service provided?

- Women learn about First Steps services through multiple sources, including when they have a pregnancy test, when they apply for medical coupons, when they visit their health care provider, when applying for the Women, Infants and Children Supplemental Nutrition Program (WIC), or by contacting the toll-free Healthy Mothers/Healthy Babies information line.
- Women can apply for First Steps by visiting their local DSHS Community Service Office (CSO). They can call 1-800-322-2588 for more information, or can access the CSO online at <https://www2.wa.gov/dshs/onlinecso/findservice.asp>
- First Steps support services are provided by approximately 92 private and public agencies in over 150 sites throughout the state. All agencies either provide or partner with other agencies to provide services of the Women, Infants and Children Supplemental Nutrition Program (WIC). (For additional information, see the *Nutrition Services* Chapter.)

Eligibility

- All pregnant women in the State of Washington whose income is at or below 185% of the Federal Poverty Level (FPL) are eligible for Medicaid-paid maternity care, including First Steps support services.
- Maternity Support Services may be provided only during the “maternity cycle,” which means from the onset of pregnancy through the end of the month in which the 60th postpartum day occurs.
- Infant Case Management Services are restricted to high risk infants less than one year old living with his or her biological parent whose income is up to 200% FPL. Qualifying criteria for a high risk infant include physical, developmental, or safety issues that impact health and development.

Who is receiving the service?

Of the 36,118 Washington women (45.6% of all births) who received Medicaid coverage for their prenatal care and/or delivery, 25,521 (70.7% of Medicaid Deliveries) received First Steps support services in 2003.¹ In 2003, 56% of First Steps support services were public health nursing services, 19% were behavioral health services, 14% were nutrition services and 10% were community health worker visits.² The table below shows the numbers of teen women who received any First Steps support services as a percent of Medicaid deliveries, as well as the breakdown by race/ethnicity.

² Conlon, D. Medical Assistance Administration First Steps Procedures by Procedure Code and Date of Service, Fiscal Years 2003-2005 Dates of Service. Washington State Department of Social and Health Services, 7/29/2005.

**Washington Women with Medicaid-paid Births in 2003
Who Received First Steps Support Services ¹**

	Non-Medicaid Deliveries		Medicaid Deliveries		First Steps Support Services	
	#	% Births	#	% Births	#	% Medicaid Births
State Total	43,119	54.4%	36,118	45.6%	25,521	70.7%
Women ≤ 17 yrs	147	7.2%	1,881	92.8%	1,606	85.4%
Women 18-19 yrs	649	13.8%	4,070	86.2%	3,135	77.0%
White, Non-Hispanic Women	32,908	63.5%	18,945	36.5%	11,743	62.0%
Hispanic Women	3,157	23.9%	10,048	76.1%	8,537	85.0%
African American Women	933	34.3%	1,788	65.7%	1,444	80.8%
American Indian Women	303	23.2%	1,004	76.8%	548	54.6%
Asian Women	3,892	67.9%	1,844	32.1%	1,420	77.0%
Pacific Islander Women	199	35.1%	368	64.9%	272	73.9%
Women reporting more than one race	1,031	42.9%	1,373	57.1%	983	71.6%

Medicaid-paid births include women who delivered a live birth or fetal death greater than 20 weeks whose deliveries were covered by Medicaid. A delivery is considered covered by Medicaid if the mother received Medicaid-paid prenatal or delivery services or if she was enrolled in Medicaid managed care for at least 3 of the 6 months prior to delivery.

Issues/concerns

- There are persistent issues with early linkage and referral of pregnant women to First Steps programs from the community service offices, including women at high risk for poor outcomes.
- Long term sustainability of this program will depend on innovative restructuring so that intensity of services are matched appropriately to individual client needs.
- Depression during the perinatal period has been identified as a significant risk factor that is affecting the long term health of the pregnant woman, her infant and family, yet there are inadequate services in communities throughout Washington to meet the needs of these women.
- Eligibility criteria limit the ability of most women to obtain medical care after two months post delivery.